PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

BUR9-1999-0300-6151

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			23		Dates	* ** ** ** *		RATE	FEE	OR 	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	355.00	OR	BASIC FEE	710,00
TOTAL CHARGEABLE CLAIMS			23 minus 20≐		. 3		T	X\$ 9=		OR	X\$18=	<#
INDEPENDENT CLAIMS			3 mir	nus 3 =	*0			X40=		OR	X80=	<i>J</i> /
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT		•			+135=		OR	+270=	_
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				L	TOTAL		OR	TOTAL	264,10
CLAIMS AS AMENDED - PART II								1] •	OTHER	THAN
(Column 1) (Column 2) (Column 3)							-	SMALL E		OR	SMALL	
AMENDMENT A	A	CLAIMS REMAINING AFTER AMENDMENT	集集 企	HIGH NUM PREVIO PAID	1BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 30	Minus	** &	23	= //		X\$ 9=		OR	X\$18=	126
	Independent	* /	Minus	***	3	= /		X40=		OR	X80=	84
L	Le	NTATION OF MI			•			+135=		OR	+270=	
BEST AVAILABLE COPY								TOTAL			TOTAL ADDIT. FEE	
		(Column 1)			mn 2)	(Column 3)	AL	ODIT. FEE			ADDII. FELI	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	i i ii u a	NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X40=		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							. 105_			. 270_	
							L	+135= TOTAL		OR	+270=	
								DDIT. FEE		OR	ADDIT. FEE	
_	A 44 A 14	(Column 1) CLAIMS		(Colu		(Column 3)	_	=				<i>-</i>
AMENDMENT C	を存むする	REMAINING AFTER AMENDMENT	· 体性 · 水杨	NUM PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=			X80=	
Ĺ	FIRST PRESE	NTATION OF M	JLTIPLE DEF	'ENDEN	T CLAIM		┞			OR	,	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+135= TOTAL		OR	+270=	
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR ,	TOTAL ADDIT. FEE	
	The Highest Num	mber Previously Pai Iber Previously Pai	ald For IIV I Fill id For" (Total or	S SPACE Independ	18 Iess เกล lent) is the	n 3, enter 3. hiahest number	r found	d in the app	ropriate box	in col	umn 1.	